

**UNITED STATES DISTRICT COURT
DISTRICT OF DELAWARE**

In re:) Chapter 11
) USBC , No.01-56(PJW)
TWA,INC. POST CONFIRMATION ESTATE,) AP -No.08-11
) (Jointly Administered)
 Debtors)

| | | |
|---|---|--|
| Herbert McMillian |) | AFFIDAVIT TO PROCEED |
| Creditor / Appellant |) | WITHOUT PREPAYMENT OF |
| vs. |) | FEES OR COSTS |
| Trans World Airlines, et al., and |) | |
| (<i>its Recipients</i>) and |) | Case No. 1-08-civil-180(SLR) |
| |) | JURY DEMANDED - Appellant |
| Hartford Insurances Group, Inc.. |) | |
| <i>Insurer - Carrier, Debtors / Appellees</i> |) | |
| |) | <u>JURISDICTION FEDERAL QUESTION:</u> |

I, **Herbert McMillian**, declare that I am the undersigned *for* Creditor or Appellant / Movant, in the above - caption - entitled proceedings, that in support of **my requests** to proceed without prepayment of fees or costs under 28 USC - 1915, I declare that I am unable to pay the costs to conduct any investigation and prosecution or proceeding, whether a "debtor" has violated of the "plans" **see;** (Title 18 USC-151. Crimes and Criminal Procedure -Definition - "debtor" petition has been filed under title 11). and that I am entitled to the relief sought under Title IV - F.R.C.P. 8(a); 29 USC- 1301 et. seq. and 1303(a) (b) and 29 USC-1331 and 1332 of the TWA, Inc. et al. unpaid full **PBGC** by **ERISA**, "**Plans**" / **Notice of Appeal.**

In support of this Application In Forma Pauperis Relief, I, appellant, answer the following **questions** under penalty of perjury:

1. Are you currently incarcerated? **No**
2. Are you currently employed ? **No**
(b) date of your last employment, 8 / 30 /1979 , the amount of your take-home salary or wages and pay period approx.\$500.00 plus dollars weekly and the name and address of your last employer, Trans World Airlines Inc. at. JFK Airport (Ramp) in regarding to on the job **personal injury** on date of 8 /30 / 79.
3. In the past 12 twelve months have you received any money from any of the following sources?
(a) Only source: Social Security Act. **Yes**

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(b) other sources:

None

Describe of source of money and state the amount received AND what you expect will continue to receive. Social Security Check of sum \$957.00 Monthly.

4. Do you any cash or checking account? **Yes)** of direct checking deposit, state the total amount 957.00 by Monthly from social security act.

5. Do you own any real estate, stocks, bond, securities, other financial instruments, automobiles or other valuable property? **No**

6. List the persons who are dependent on you for support, state your relationship to each person and how much you contribute to their support?


| <u>Dependent</u> | <u>Age</u> | <u>Relationship</u> |
|--|------------|---------------------|
| Arielle McMillian , DOB -4-25-1990 - I, am the Father and contribute of approx. Amount \$520.00 Monthly under the Social Security Act. | | |

I, declare under penalty of perjury that the *aforesaid* and *foregoing* information is true and correct. (28 U.S.C.~ 1746) and 18 U.S.C. 1621. and

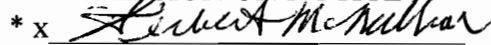
Appellant, will provide any questions of evidentiary documents on written request only.

Dated: June 11 , 2008

State of New York - County of Queens) ss:
SWORN TO AND SUBSCRIBED
by me on this 11th day of June 2008


MICHAEL E. PEARSON
Notary Public, State of New York
No. 01PE6134402
Qualified in Queens County
Commission Expires October 3rd, 2009

SUBMISSION ON NOTICE

* X 
Herbert McMillian - Appellant
179-17 Anderson Road
St. Albans , NY 11434
(718) 723-4693

| | | |
|-------------------------------------|-----|---|
| Sue L. Robinson, Chief Judge | and | Peter J. Walsh , Appointed Judge (<i>recusal</i>) |
| United States District Court | | United States Bankruptcy Court |
| 844 King Street | | 824 Market Street |
| Wilmington , DE 19801 | | Wilmington, DE 19899 |

Witness: by , Judge;s or Clerk's of Court's, shall "notify" United States Attorney General , by designee, United States Attorney / DE "Relating to Bankruptcy CRIMES and FRAUD (18- USC- 152 through 158)" and Trustee's , report to United States Trustee -region- Panel.

The parties to the **order** appealed from and the names of attorney's are as follows:
(under F.R.Cv.P 5.) **see; CERTIFICATE OF SERVICE (attached).**